



August 26, 2009

Dear CACFP Contact:

In June 2009 you, or a representative of your organization, participated in a CACFP Child Care Culinary Workshop. We hope you learned how to create meals and snacks that were easy, economical, nutritious and kid-friendly. Also we hope you were reminded how fun and rewarding feeding children can be.

The enclosed survey is to be completed by anyone in your organization that attended one of the workshops. Everyone who attended a workshop is encouraged to complete a survey. Please make additional copies of this survey as needed. Participation in the survey and responses are completely voluntary and anonymous. (All identifying information will be removed prior to analysis.) Please complete the survey and return by **Friday, September 18, 2009**.

Return completed survey to:

Barbara Mayfield
Dept. of Foods and Nutrition
Purdue University
700 W. State St.
W. Lafayette, IN 47907

We appreciate the important role you play in growing healthy children. If you have any questions or concerns, please contact me (cmarkle@doe.in.gov) at 317-232-0850 or 800-537-1142.

Sincerely,

A handwritten signature in cursive script that reads "Carol Markle".

Carol Markle
CACFP Team Leader
Indiana Department of Education



1. Which culinary workshop location did you attend (city): _____

2. Job title of person completing survey: **(check all that apply)**

- ☐ owner
 ☐ center director/assistant director
 ☐ food coordinator
☐ nutrition/health coordinator
 ☐ cook
 ☐ other: _____

Please answer the following questions. Share what you think, how you feel, and what you do.

3. Finish this sentence: Since attending the culinary workshop, I have been a good role model to the children by _____.

4. As a result of attending the workshop, which meal have you changed the most to meet the dietary guidelines and MyPyramid? **(check one box only)**

- ☐ breakfast
 ☐ snacks
 ☐ lunch
 ☐ all have been changed
 ☐ none

List one example of a change you've made: _____

The following statements are about the actions you or your program have taken since attending the workshops.

Respond to the following statements as they relate to your program. Check only one box for each statement.

(In the spaces provided, please feel free to describe your answers as desired.)

	Haven't thought about doing	Did after attending workshop	Plan to do within 3 months	No plans to do this
5. Shared information from workshop with <u>staff</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Evaluated our current mealtime environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Made one or more changes to make the physical mealtime environment optimal (tables, chairs, dishes, etc.) <input type="checkbox"/> no changes necessary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Tried a new aspect of family style dining	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Tried at least one new recipe	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Tried a new nutrition education activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(please turn over)

	Haven't thought about doing	Did after attending workshop	Plan to do within 3 months	No plans to do this
11. Added at least one whole grain serving to the menu <u>every day</u> . <input type="checkbox"/> already serving one whole grain serving a day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Increased the variety of <u>vegetables</u> served throughout the week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Served more fresh, frozen, canned or dried fruit instead of juice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Served non-fat or 1% Milk to children 2 and over <input type="checkbox"/> already serving non-fat or 1% milk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Served high fat or fried meat no more than once a week <input type="checkbox"/> already serving high fat / fried meat less than once a week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Tried a new approach for communicating with parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Promoted family meals to the families we serve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Used one of the resources listed in the Chef's Workbook	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Which of the following currently describes your practice regarding children tasting food at meals and snacks in your program? **(Circle only one letter)**

- a. Children are asked to take one bite of each food served.
- b. Children are encouraged but not required to taste each food served.
- c. Children are permitted to turn down any food offered and are not required to take or taste a food.

20. Describe anything else you would like to share about your experience at the workshop, or any changes you have made since attending the workshop?

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Purdue University
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